

**Application for the Board of Zoning Appeals
Town of Warrenton, Virginia**

PLEASE COMPLETE ALL SECTIONS OF THE APPLICATION. APPLICATIONS AND FEES MUST BE RECEIVED THIRTY (30) DAYS IN ADVANCE, ON THE FIRST TUESDAY OF EACH MONTH. IF YOU HAVE QUESTIONS, PLEASE CONTACT THE DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT AT 540-347-2405.

APPLICANT INFO:

Name _____ Date _____

Mailing Address _____

Telephone Number (Day) _____

PROPERTY INFORMATION:

Subject Property Street Address _____

GPIN# _____ Zoning District _____

Is the property in the Historic District? _____

This application has been requested for a (an):

- ☐ a. Variance to Article _____, Section _____ of the Zoning Ordinance;
- ☐ b. Special Exception pursuant to Article 29, Section 5 of the Zoning Ordinance;
- ☐ c. Appeal to a decision made by the Zoning Administrator.

Purpose of Application:

Please be very specific and describe and/or justify the nature of your request. It is recommended that you include this statement as a separate attachment.

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The Applicant must:

1. Pay all fees pursuant to the following schedule:

- Variance - \$250.00 plus the cost of advertising and property notice mailings.
- Special Exception - \$250.00 plus the cost of advertising and property notice mailings.
- Appeal of Administrative Decision - \$250.00 plus the cost of advertising and property notice mailings.

2. Be present, or have adequate representation, at the meeting. The Warrenton BZA meets on the first Tuesday of each month.

3. Provide all relevant information (i.e. – plans, pictures, plat) with this application.

The undersigned declares that the above statements and those contained in any accompanying information to the Board of Zoning Appeals are true.

Applicant Signature: _____ Date: _____

Property Owner Signature: _____ Date: _____